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transmitted to the USPTO (703)) 746-4000, on the	date indicated helow.
Diane M. Miles		(Depositor's name)
Dave Mil	MIDOS	(Signature)
April 18, 2006	,	(Deta)

ſ	APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
Ī	10/728,643	12/05/2003	Kyung-Ju Choi	ZM921-05026	8428

TITLE OF INVENTION: THERMOBONDABLE FILTER MEDIUM AND BORDER FRAME AND METHOD OF MAKING SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE	TOTAL I	EE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700		04/18/2006
EXAM	INER	ART UNI	г	CLASS-SUBCLASS]		
Goff II, Jo	hn L.	1733		156-293000	•		
Change of correspondence address or indication of "Fee Address" (SCR 1.353). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) stateched. **Jee Address findication (Fee Address' Indication form PTO/SB/127) indication form PTO/SB/127. **Pee Address' Indication (Fee Address' Indication form PTO/SB/127). Number is required.		2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm funcing as a member a registered patent attorneys or agent and the names of to 2 registered patent attorneys or agents. If no name is inted, no name will be perinted.		1Steve A. Witters 2Middleton Reutlinger			

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

AAF-McQuay Inc.

Louisville, Kentucky

Please check the appropriate assignee category or categories (will not be printed on the patent): 🔘 Individual 🛭 Corporation or other private group entity 🚨 Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):

A check in the amount of the feet's) is enclosed. Payment by credit card. Form PTO-2038 is attached.

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The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _______ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. Sec 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status, See 37 CFR 1.27(g)(2).

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Authorized Signature

Date_April 18, 2006

Typed or printed name Steven A. Witters

Registration No. 53,923

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